

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Principal Life Insurance Company Political Action Committee

ADDRESS (number and street)

711 High St.

Government Relations

☐Check if different  
than previously  
reported. (ACC)

Des Moines

IA

50392

0220

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00128918

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☒Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

11

01

2009

through

11

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Terry Tobin

Signature of Treasurer

Electronically Filed by Terry Tobin

Date

12

08

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 110

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M M  
1 1D D  
0 1Y Y Y Y  
2 0 0 9

To:

M M  
1 1D D  
3 0Y Y Y Y  
2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2009</span>		35905.96
(b) Cash on Hand at Beginning of Reporting Period .....	68107.54	
(c) Total Receipts (from Line 19) .....	12650.35	163613.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	80757.89	199519.89
7. Total Disbursements (from Line 31) .....	11750.00	130512.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	69007.89	69007.89
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

4 / 110

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	8713.46	81305.61
(ii) Unitemized .....	3936.89	79308.32
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12650.35	160613.93
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	12650.35	160613.93
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	12650.35	163613.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12650.35	163613.93

## DETAILED SUMMARY PAGE

of Disbursements

5 / 110

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	107750.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	12.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	12.00	
29. Other Disbursements.....	6750.00	22750.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11750.00	130512.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11750.00	130512.00	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 110

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	12650.35	160613.93
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	12.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12650.35	160601.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Noel John Anderson

Mailing Address 201 Jones Road  
Principal Financial GrpCity State Zip Code  
Waltham MA 24511-605FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.Occupation  
Reg VP - Nonqualified Plans

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-923

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Noel John Anderson

Mailing Address 201 Jones Road  
Principal Financial GrpCity State Zip Code  
Waltham MA 24511-605FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.Occupation  
Reg VP - Nonqualified Plans

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Transaction ID: 200912015526-924

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

David M. Ashton

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.Occupation  
Asst Dir - IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-238

Amount of Each Receipt this Period

9.00

SUBTOTAL of Receipts This Page (optional) .....

49.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Arthur John Bacci

Mailing Address 6200 Park Avenue

City

Des Moines

State

IA

Zip Code

50321-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-CEO/President PTC &amp; Bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: 200912015526-47

Amount of Each Receipt this Period

28.84

**B.**

Full Name (Last, First, Middle Initial)

Arthur John Bacci

Mailing Address 6200 Park Avenue

City

Des Moines

State

IA

Zip Code

50321-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-CEO/President PTC &amp; Bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: 200912015526-48

Amount of Each Receipt this Period

28.84

**C.**

Full Name (Last, First, Middle Initial)

Craig Lawrence Bassett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP &amp; Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: 200912015526-187

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional) .....

89.42

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Craig Lawrence Bassett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-188

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

Neil Andrew Baxter

Mailing Address 28411 Northwestern Highway Suite 7  
Principal Financial Group

City

Southfield

State

MI

Zip Code

48034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP of Sales - Group Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-917

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Neil Andrew Baxter

Mailing Address 28411 Northwestern Highway Suite 7  
Principal Financial Group

City

Southfield

State

MI

Zip Code

48034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP of Sales - Group Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-918

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

61.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael Jon Beer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-843

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Jon Beer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-844

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Louise A. Billmeyer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP - Health IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-729

Amount of Each Receipt this Period

39.00

**SUBTOTAL** of Receipts This Page (optional) .....

109.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Louise A. Billmeyer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP - Health IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-730

Amount of Each Receipt this Period

39.00

**B.**

Full Name (Last, First, Middle Initial)

Paula J. Binkley-Bittick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-963

Amount of Each Receipt this Period

11.90

**C.**

Full Name (Last, First, Middle Initial)

Paula J. Binkley-Bittick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-964

Amount of Each Receipt this Period

11.90

**SUBTOTAL** of Receipts This Page (optional) .....

62.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Kim M. Blaugher

Mailing Address 910 W Main Street  
Suite 316

City State Zip Code  
Boise ID 83702-5733

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-639

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Kim M. Blaugher

Mailing Address 910 W Main Street  
Suite 316

City State Zip Code  
Boise ID 83702-5733

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-640

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Patti R. Blumer

Mailing Address 1350 I Street Northwest  
Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Director, Federal Gov Rel-DC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1161.60

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-947

Amount of Each Receipt this Period

48.40

**SUBTOTAL** of Receipts This Page (optional) .....

88.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Patti R. Blumer

Mailing Address 1350 I Street Northwest  
Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Director, Federal Gov Rel-DC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1161.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-948

Amount of Each Receipt this Period

48.40

**B.**

Full Name (Last, First, Middle Initial)

Dexter R. Bodin

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Director-Network Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.74

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-296

Amount of Each Receipt this Period

8.61

**C.**

Full Name (Last, First, Middle Initial)

Christopher J. Bowman

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Corp Strategic Dev & Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-161

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

107.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Christopher J. Bowman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Corp Strategic Dev & Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-162

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Jonette Rae Brandsgard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Medical Management Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-547

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Jonette Rae Brandsgard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Medical Management Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-548

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

David James Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP, Product & Distrib Compliance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-243

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

David James Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP, Product & Distrib Compliance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-244

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

Jill Renae Brown

Mailing Address 1100 Investment Boulevard

City

El Dorado Hills

State

CA

Zip Code

95762-5710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CFO-Principal Funds

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-505

Amount of Each Receipt this Period

15.38

**SUBTOTAL** of Receipts This Page (optional) .....

78.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jill Renae Brown

Mailing Address 1100 Investment Boulevard

City

El Dorado Hills

State

CA

Zip Code

95762-5710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CFO-Principal Funds

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-506

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Paul Alvin Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Institutional Mkt Segment

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-949

Amount of Each Receipt this Period

39.00

**C.**

Full Name (Last, First, Middle Initial)

Paul Alvin Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Institutional Mkt Segment

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-950

Amount of Each Receipt this Period

39.00

**SUBTOTAL** of Receipts This Page (optional) .....

93.38

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Ned Alan Burmeister

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal International,  
Inc.

Occupation

VP,CFO & Risk Mgr-Prin Intrn'l

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-915

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Ned Alan Burmeister

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal International,  
Inc.

Occupation

VP,CFO & Risk Mgr-Prin Intrn'l

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-916

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Barbara B. Burnett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Corp Negotiator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-57

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Barbara B. Burnett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Corp Negotiator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-58

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas L. Burnor

Mailing Address 18101 Von Karman Avenue  
Suite 1170

City

Irvine

State

CA

Zip Code

92612-7169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1222

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

Thomas L. Burnor

Mailing Address 18101 Von Karman Avenue  
Suite 1170

City

Irvine

State

CA

Zip Code

92612-7169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1223

Amount of Each Receipt this Period

28.85

**SUBTOTAL** of Receipts This Page (optional) .....

77.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gregory John Burrows

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1488.24

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-399

Amount of Each Receipt this Period

63.45

**B.**

Full Name (Last, First, Middle Initial)

Gregory John Burrows

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1488.24

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-400

Amount of Each Receipt this Period

63.45

**C.**

Full Name (Last, First, Middle Initial)

Teresa Marie Button

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1202

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

141.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Teresa Marie Button

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1203

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Chris Tonnis Calos

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Group Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-151

Amount of Each Receipt this Period

31.85

**C.**

Full Name (Last, First, Middle Initial)

Chris Tonnis Calos

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Group Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-152

Amount of Each Receipt this Period

31.85

**SUBTOTAL** of Receipts This Page (optional) .....

78.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Nicholas M. Cecere

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Individual Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-919

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)

Nicholas M. Cecere

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Individual Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-920

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)

Lillian Ilin Chen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-693

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

108.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Lillian Ilin Chen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-694

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Barrie Gibb Christman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.28

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-67

Amount of Each Receipt this Period

38.47

**C.**

Full Name (Last, First, Middle Initial)

Barrie Gibb Christman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.28

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-68

Amount of Each Receipt this Period

38.47

**SUBTOTAL** of Receipts This Page (optional) .....

108.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Timothy Joseph Cleary

Mailing Address 11100 Wayzata Boulevard, Suite 211  
Principal Financial Group

City State Zip Code  
Minnetonka MN 55305-5517

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1234

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Timothy Joseph Cleary

Mailing Address 11100 Wayzata Boulevard, Suite 211  
Principal Financial Group

City State Zip Code  
Minnetonka MN 55305-5517

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1235

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Cindy Mae Close

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Director Field Office Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-171

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

40.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Cindy Mae Close

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director Field Office Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-172

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Eileen Mary Conroy

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-353

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Eileen Mary Conroy

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-354

Amount of Each Receipt this Period

15.38

**SUBTOTAL** of Receipts This Page (optional) .....

40.76

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Cathy L. Cory

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

State/Fed Compl Consult

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-141

Amount of Each Receipt this Period

17.00

**B.**

Full Name (Last, First, Middle Initial)

Cathy L. Cory

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

State/Fed Compl Consult

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-142

Amount of Each Receipt this Period

17.00

**C.**

Full Name (Last, First, Middle Initial)

Martha Peairs Crist

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-779

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

44.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Martha Peairs Crist

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-780

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Michael W. Cumings

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-849

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Michael W. Cumings

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-850

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

40.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Andrew Piper Dalglish

Mailing Address 4141 Parklake Ave; Suite 400

City

Raleigh

State

NC

Zip Code

27612-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Non-Qualified

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-23

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew Piper Dalglish

Mailing Address 4141 Parklake Ave; Suite 400

City

Raleigh

State

NC

Zip Code

27612-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Non-Qualified

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-24

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Ronald L. Danilson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1066

Amount of Each Receipt this Period

65.00

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Ronald L. Danilson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1067

Amount of Each Receipt this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)

Michael J. Daugherty

Mailing Address 6525 Chancellor Drive  
Cedar Falls Industrial Park

City

Cedar Falls

State

IA

Zip Code

50613-6957

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Retirement & Investor Serv

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-851

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Michael J. Daugherty

Mailing Address 6525 Chancellor Drive  
Cedar Falls Industrial Park

City

Cedar Falls

State

IA

Zip Code

50613-6957

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Retirement & Investor Serv

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-852

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Douglas Scott Dornacker

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
AVP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-329

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Douglas Scott Dornacker

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
AVP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-330

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Gary Lane Dorton

Mailing Address 4141 Parklake Ave; Suite 400

City

Raleigh

State

NC

Zip Code

27612-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Employer Solutions & Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-379

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

51.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gary Lane Dorton

Mailing Address 4141 Parklake Ave; Suite 400

City

Raleigh

State

NC

Zip Code

27612-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Employer Solutions & Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-380

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

Timothy Mark Dunbar

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Exec Dir - Equities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.04

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1240

Amount of Each Receipt this Period

63.46

**C.**

Full Name (Last, First, Middle Initial)

Timothy Mark Dunbar

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Exec Dir - Equities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.04

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1241

Amount of Each Receipt this Period

63.46

**SUBTOTAL** of Receipts This Page (optional) .....

158.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gregory Bernard Elming

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-401

Amount of Each Receipt this Period

64.00

**B.**

Full Name (Last, First, Middle Initial)

Gregory Bernard Elming

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-402

Amount of Each Receipt this Period

64.00

**C.**

Full Name (Last, First, Middle Initial)

Ralph Craig Eucher

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP HR, Corp Svcs & RIS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-991

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

153.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Ralph Craig Eucher

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP HR, Corp Svcs & RIS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-992

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Nora Mary Everett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-925

Amount of Each Receipt this Period

45.00

**C.**

Full Name (Last, First, Middle Initial)

Nora Mary Everett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-926

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

115.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Douglas Alan Fick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP - SBD IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-331

Amount of Each Receipt this Period

38.00

**B.**

Full Name (Last, First, Middle Initial)

Douglas Alan Fick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP - SBD IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-332

Amount of Each Receipt this Period

38.00

**C.**

Full Name (Last, First, Middle Initial)

James C. Fifield

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Assistant General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-421

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

86.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

James C. Fifeild

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Assistant General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-422

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Patrick Finnegan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Chief Invest Officer- PMC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-855

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Patrick Finnegan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Chief Invest Officer- PMC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-856

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

74.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jed A. Fisk

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Corp Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-461

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Jed A. Fisk

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Corp Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-462

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Jonathan W. Flentgen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Financial Analyst Iv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-543

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jonathan W. Flentgen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Financial Analyst Iv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-544

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Louis E. Flori

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP - Capital Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-727

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Louis E. Flori

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP - Capital Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-728

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Melita L. Frankford

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

IT-Quality Assurance Anlst Iii

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-837

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Melita L. Frankford

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

IT-Quality Assurance Anlst Iii

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-838

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Brent Eugene Fritz

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Actuary-Individual

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.02

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-105

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

51.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Brent Eugene Fritz

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Actuary-Individual

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.02

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-106

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

Paul E. Fromm

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Retirement & Investor Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-953

Amount of Each Receipt this Period

19.23

**C.**

Full Name (Last, First, Middle Initial)

Paul E. Fromm

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Retirement & Investor Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-954

Amount of Each Receipt this Period

19.23

**SUBTOTAL** of Receipts This Page (optional) .....

70.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Cary Allan Fuchs

Mailing Address 1100 Investment Boulevard

City

El Dorado Hills

State

CA

Zip Code

95762-5710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Principal Funds Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-133

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Cary Allan Fuchs

Mailing Address 1100 Investment Boulevard

City

El Dorado Hills

State

CA

Zip Code

95762-5710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Principal Funds Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-134

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas John Graf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3885.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1226

Amount of Each Receipt this Period

165.00

**SUBTOTAL** of Receipts This Page (optional) .....

205.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Thomas John Graf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3885.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1227

Amount of Each Receipt this Period

165.00

**B.**

Full Name (Last, First, Middle Initial)

Lynn Marie Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-735

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Lynn Marie Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-736

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

245.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Steven Kent Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-Real Estate Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1168

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Steven Kent Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-Real Estate Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1169

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Victoria Whitaker Gray

Mailing Address 51 Germantown Court Suite 101  
Principal Financial Group

City

Cordova

State

TN

Zip Code

38018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1272

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

139.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Victoria Whitaker Gray

Mailing Address 51 Germantown Court Suite 101  
Principal Financial Group

City State Zip Code  
Cordova TN 38018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1273

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Gregg R. Griesemer

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-395

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Gregg R. Griesemer

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-396

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Connie Kane Gunter

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City State Zip Code  
Charlotte NC 28277-2467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Development Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-177

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Connie Kane Gunter

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City State Zip Code  
Charlotte NC 28277-2467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Development Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Transaction ID: 200912015526-178

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick Gregory Halter

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Head of PrinREI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-941

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

51.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Patrick Gregory Halter

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Head of PrinREI

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-942

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

Mark A. Hanrahan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-CRE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-757

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mark A. Hanrahan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-CRE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-758

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

231.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Loraine N. Hardin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Chief Admin Officer Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-715

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Loraine N. Hardin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Chief Admin Officer Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-716

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Monica L. Haun

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-897

Amount of Each Receipt this Period

19.23

**SUBTOTAL** of Receipts This Page (optional) .....

89.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Monica L. Haun

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
AVP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-898

Amount of Each Receipt this Period

19.23

**B.**

Full Name (Last, First, Middle Initial)

Philip G. Hayne

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
Nat'l Advanced Solution Specia

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-977

Amount of Each Receipt this Period

11.92

**C.**

Full Name (Last, First, Middle Initial)

Philip G. Hayne

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
Nat'l Advanced Solution Specia

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-978

Amount of Each Receipt this Period

11.92

**SUBTOTAL** of Receipts This Page (optional) .....

43.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Christopher J. Henderson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-167

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Christopher J. Henderson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-168

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy Allen Hill

Mailing Address 3727 South Hills Way

City

Eagan

State

MN

Zip Code

55123-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

National Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1242

Amount of Each Receipt this Period

18.00

**SUBTOTAL** of Receipts This Page (optional) .....

82.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Timothy Allen Hill

Mailing Address 3727 South Hills Way

City

Eagan

State

MN

Zip Code

55123-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

National Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1243

Amount of Each Receipt this Period

18.00

**B.**

Full Name (Last, First, Middle Initial)

Jill Marie Hittner

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Financial Officer-PGI

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-507

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

Jill Marie Hittner

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Financial Officer-PGI

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-508

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

81.48

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Joyce N. Hoffman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Life Ins Co.

Occupation

SVP &amp; Corporate Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: 200912015526-567

Amount of Each Receipt this Period

63.46

**B.**

Full Name (Last, First, Middle Initial)

Joyce N. Hoffman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Life Ins Co.

Occupation

SVP &amp; Corporate Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: 200912015526-568

Amount of Each Receipt this Period

63.46

**C.**

Full Name (Last, First, Middle Initial)

Rebecca L. Hoffman

Mailing Address 690 Berkmar Circle

City

Charlottesville

State

VA

Zip Code

22901-1464

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Life Ins Co.

Occupation

Director- Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: 200912015526-1003

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

136.92

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Rebecca L. Hoffman

Mailing Address 690 Berkmar Circle

City

Charlottesville

State

VA

Zip Code

22901-1464

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director- Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1004

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Roger (Daryl) D. Holton

Mailing Address 7077 Bonneval Road  
Suite 380

City

Jacksonville

State

FL

Zip Code

32216-6055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Managing Director-Unit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.50

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1060

Amount of Each Receipt this Period

16.50

**C.**

Full Name (Last, First, Middle Initial)

Roger (Daryl) D. Holton

Mailing Address 7077 Bonneval Road  
Suite 380

City

Jacksonville

State

FL

Zip Code

32216-6055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Managing Director-Unit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.50

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Transaction ID: 200912015526-1061

Amount of Each Receipt this Period

16.50

**SUBTOTAL** of Receipts This Page (optional) .....

43.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Daniel Joseph Houston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

President Ret &amp; Investor Svcs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2808.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: 200912015526-213

Amount of Each Receipt this Period

117.00

**B.**

Full Name (Last, First, Middle Initial)

Daniel Joseph Houston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

President Ret &amp; Investor Svcs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2808.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: 200912015526-214

Amount of Each Receipt this Period

117.00

**C.**

Full Name (Last, First, Middle Initial)

Bradley G. Jensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CAO - Investment Accounting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

709.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: 200912015526-93

Amount of Each Receipt this Period

28.84

SUBTOTAL of Receipts This Page (optional) .....

262.84

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Bradley G. Jensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CAO - Investment Accounting

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.56

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-94

Amount of Each Receipt this Period

28.84

**B.**

Full Name (Last, First, Middle Initial)

Richard C. Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir IDI Oper-New & Exist Bus

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1028

Amount of Each Receipt this Period

12.00

**C.**

Full Name (Last, First, Middle Initial)

Richard C. Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir IDI Oper-New & Exist Bus

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1029

Amount of Each Receipt this Period

12.00

**SUBTOTAL** of Receipts This Page (optional) .....

52.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Roman E. Kalpas

Mailing Address Wilmington Retirement Serv  
1013 Centre Road

City State Zip Code  
Wilmington DE 19805-1265

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Trust Company

Occupation  
IT Application Analyst-Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1064

Amount of Each Receipt this Period

11.00

**B.**

Full Name (Last, First, Middle Initial)

Roman E. Kalpas

Mailing Address Wilmington Retirement Serv  
1013 Centre Road

City State Zip Code  
Wilmington DE 19805-1265

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Trust Company

Occupation  
IT Application Analyst-Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1065

Amount of Each Receipt this Period

11.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick J. Kane

Mailing Address 1227 Stony Hill Road

City State Zip Code  
Wilbraham MA 01095-2424

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Reg VP - Life Brokerage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-943

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

32.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Patrick J. Kane

Mailing Address 1227 Stony Hill Road

City

Wilbraham

State

MA

Zip Code

01095-2424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Reg VP - Life Brokerage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	9	

Transaction ID: 200912015526-944

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Clifford P. Karthaus

Mailing Address 19407 Camden Avenue

City

Elkhorn

State

NE

Zip Code

68022-1124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Regional Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	5	/	2	0	9	

Transaction ID: D97C23F5A96C43868F2

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)

Mark A. Kinback

Mailing Address 405 Grove Street

City

Worcester

State

MA

Zip Code

01605-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Di Multi Life Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: 200912015526-761

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Mark A. Kinback

Mailing Address 405 Grove Street

City

Worcester

State

MA

Zip Code

01605-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Di Multi Life Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-762

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Monica Jean Kirgan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-National Service Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-899

Amount of Each Receipt this Period

36.00

**C.**

Full Name (Last, First, Middle Initial)

Monica Jean Kirgan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-National Service Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-900

Amount of Each Receipt this Period

36.00

**SUBTOTAL** of Receipts This Page (optional) .....

82.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Kara Marie Kohler-Hoogensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Strategy Director-Prin Funds

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-589

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Kara Marie Kohler-Hoogensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Strategy Director-Prin Funds

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-590

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Curtis S. Krause

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-191

Amount of Each Receipt this Period

11.00

**SUBTOTAL** of Receipts This Page (optional) .....

31.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Curtis S. Krause

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-192

Amount of Each Receipt this Period

11.00

**B.**

Full Name (Last, First, Middle Initial)

Ellen Ruth Lamale

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
SVP & Chief Risk Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-361

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

Ellen Ruth Lamale

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation  
SVP & Chief Risk Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-362

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional) .....

151.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Blaine William Laverick

Mailing Address 4141 Parklake Ave; Suite 400

City

Raleigh

State

NC

Zip Code

27612-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Executive Benefit Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-77

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Blaine William Laverick

Mailing Address 4141 Parklake Ave; Suite 400

City

Raleigh

State

NC

Zip Code

27612-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Executive Benefit Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-78

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Julia M. Lawler-Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Svp & Chief Inv Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-573

Amount of Each Receipt this Period

55.00

**SUBTOTAL** of Receipts This Page (optional) .....

85.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Julia M. Lawler-Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Svp & Chief Inv Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-574

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)

Richard C. Lawson

Mailing Address 1350 I Street Northwest  
Suite 880

City

Washington D.C.

State

DC

Zip Code

20005-7207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.58

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1030

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)

Richard C. Lawson

Mailing Address 1350 I Street Northwest  
Suite 880

City

Washington D.C.

State

DC

Zip Code

20005-7207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.58

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1031

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional) .....

131.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Scott Patrick Leiberton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-Product Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1106

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Patrick Leiberton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-Product Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1107

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Brayton T. Li

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Managing Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-95

Amount of Each Receipt this Period

8.85

**SUBTOTAL** of Receipts This Page (optional) .....

48.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Brayton T. Li

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Managing Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-96

Amount of Each Receipt this Period

8.85

**B.**

Full Name (Last, First, Middle Initial)

Terrance Joseph Lillis

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1208

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Terrance Joseph Lillis

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1209

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

88.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gregory Allen Linde

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Individual Life Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-403

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Gregory Allen Linde

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Individual Life Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-404

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Denise A. Loomis

Mailing Address 999 Fifth Avenue  
Suite 490

City

San Rafael

State

CA

Zip Code

94901-2995

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Reg Client Svc Dir-Retirement

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-283

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

65.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Denise A. Loomis

Mailing Address 999 Fifth Avenue  
Suite 490

City

San Rafael

State

CA

Zip Code

94901-2995

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Reg Client Svc Dir-Retirement

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-284

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph E. Marx

Mailing Address 5500 Main Street  
Principal Financial Group

City

Williamsville

State

NY

Zip Code

14221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-557

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph E. Marx

Mailing Address 5500 Main Street  
Principal Financial Group

City

Williamsville

State

NY

Zip Code

14221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-558

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Chris Lee Mayer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CFO-Bank & Trust Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-153

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Chris Lee Mayer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CFO-Bank & Trust Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-154

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph W. McCarty

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Annuity Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-559

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

74.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Joseph W. McCarty

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Annuity Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-560

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Daniel John McGee

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City

Charlotte

State

NC

Zip Code

28277-2467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Managing Dir, RIS Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-217

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Daniel John McGee

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City

Charlotte

State

NC

Zip Code

28277-2467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Managing Dir, RIS Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-218

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Barbara A. McKenzie

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Operations Officer-Pgi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-63

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Barbara A. McKenzie

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Operations Officer-Pgi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-64

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Arthur Michael McMahon

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.88

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-49

Amount of Each Receipt this Period

23.87

**SUBTOTAL** of Receipts This Page (optional) .....

87.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Arthur Michael McMahon

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.88

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-50

Amount of Each Receipt this Period

23.87

**B.**

Full Name (Last, First, Middle Initial)

Shelly Marie Meighan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir - Strategy & Mkt Developme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1132

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Shelly Marie Meighan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir - Strategy & Mkt Developme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1133

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

73.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Andrew C. Miller

Mailing Address 18 Foxcroft Run

City

Avon

State

CT

Zip Code

06001-2509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Relationship Mgr - AMG PFD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-27

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew C. Miller

Mailing Address 18 Foxcroft Run

City

Avon

State

CT

Zip Code

06001-2509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Sr Relationship Mgr - AMG PFD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-28

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Amy Joan Mills

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-15

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional) .....

58.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Amy Joan Mills

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-16

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)

Timothy Jon Minard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1246

Amount of Each Receipt this Period

65.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy Jon Minard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Retirement Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1247

Amount of Each Receipt this Period

65.00

**SUBTOTAL** of Receipts This Page (optional) .....

168.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jacque Sue Mohs

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Dynamic Market Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-417

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Jacque Sue Mohs

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Dynamic Market Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-418

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Barbara Carlson Mueller

Mailing Address 6200 Park Avenue

City

Des Moines

State

IA

Zip Code

50321-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Credit & Risk Offcr-Bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-65

Amount of Each Receipt this Period

15.38

**SUBTOTAL** of Receipts This Page (optional) .....

79.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Barbara Carlson Mueller

Mailing Address 6200 Park Avenue

City

Des Moines

State

IA

Zip Code

50321-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Credit & Risk Offcr-Bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-66

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Naim A. Munir

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Sr Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-901

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Naim A. Munir

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Sr Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-902

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

79.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Mary Agnes O'Keefe

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1061.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-807

Amount of Each Receipt this Period

44.23

**B.**

Full Name (Last, First, Middle Initial)

Mary Agnes O'Keefe

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1061.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-808

Amount of Each Receipt this Period

44.23

**C.**

Full Name (Last, First, Middle Initial)

Susan A. Palmer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Consumer Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1191

Amount of Each Receipt this Period

8.80

**SUBTOTAL** of Receipts This Page (optional) .....

97.26

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gerald W. Patterson

Mailing Address 521 5th Avenue  
5th Floor - Nlia

City State Zip Code  
New York NY 10175-0500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
COO - Nippon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-387

Amount of Each Receipt this Period

28.85

**B.**

Full Name (Last, First, Middle Initial)

Gerald W. Patterson

Mailing Address 521 5th Avenue  
5th Floor - Nlia

City State Zip Code  
New York NY 10175-0500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
COO - Nippon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-388

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

Karen Arlene Pearston

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-599

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

89.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Karen Arlene Pearston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-600

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

Merle T. Pederson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-839

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Merle T. Pederson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-840

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

95.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Peter John Prodoehl

Mailing Address 11821 Palm Beach Boulevard, Suite

City

Fort Myers

State

FL

Zip Code

33905-5908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-973

Amount of Each Receipt this Period

19.23

**B.**

Full Name (Last, First, Middle Initial)

Peter John Prodoehl

Mailing Address 11821 Palm Beach Boulevard, Suite

City

Fort Myers

State

FL

Zip Code

33905-5908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-974

Amount of Each Receipt this Period

19.23

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey K. Rader

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Head of Financial Communicatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-475

Amount of Each Receipt this Period

16.00

**SUBTOTAL** of Receipts This Page (optional) .....

54.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey K. Rader

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Head of Financial Communicatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-476

Amount of Each Receipt this Period

16.00

**B.**

Full Name (Last, First, Middle Initial)

Christopher J. Reddy

Mailing Address 888 7th Ave; 25th Floor

City

New York

State

NY

Zip Code

10106-2599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Admin Officer-PGI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.96

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-169

Amount of Each Receipt this Period

22.36

**C.**

Full Name (Last, First, Middle Initial)

Christopher J. Reddy

Mailing Address 888 7th Ave; 25th Floor

City

New York

State

NY

Zip Code

10106-2599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Admin Officer-PGI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.96

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-170

Amount of Each Receipt this Period

21.89

**SUBTOTAL** of Receipts This Page (optional) .....

60.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

R. Lucia Riddle

Mailing Address 1350 I Street Northwest  
Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-989

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

R. Lucia Riddle

Mailing Address 1350 I Street Northwest  
Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-990

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michael D. Roughton

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-869

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

132.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael D. Roughton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-870

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Angela Rae Sanders

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Accounting Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-33

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Angela Rae Sanders

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Accounting Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-34

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

72.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Valerie Clough Sandford

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir-Product Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1266

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Valerie Clough Sandford

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir-Product Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1267

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Lisa Annette Sandos

Mailing Address 2202 Kehrsgrrove Court

City

Chesterfield

State

MO

Zip Code

63005-6519

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Supplier Diversity Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-709

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Lisa Annette Sandos

Mailing Address 2202 Kehrsgrrove Court

City

Chesterfield

State

MO

Zip Code

63005-6519

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Supplier Diversity Mgr

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-710

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Irene Susan Scalfani

Mailing Address 888 7th Ave; 25th Floor

City

New York

State

NY

Zip Code

10106-2599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir-Alliance Mgmt Group, RIS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

276.84

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-415

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Irene Susan Scalfani

Mailing Address 888 7th Ave; 25th Floor

City

New York

State

NY

Zip Code

10106-2599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Dir-Alliance Mgmt Group, RIS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

276.84

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-416

Amount of Each Receipt this Period

15.38

**SUBTOTAL** of Receipts This Page (optional) .....

40.76

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Renee Vachelle Schaaf

Mailing Address 1275 Northwest 128th Street  
Suite 100

City State Zip Code  
Clive IA 50325-7450

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Natl Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1011

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Renee Vachelle Schaaf

Mailing Address 1275 Northwest 128th Street  
Suite 100

City State Zip Code  
Clive IA 50325-7450

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP-Natl Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1012

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

John Dennis Schmidt

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-531

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

104.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

John Dennis Schmidt

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-532

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Gary Paul Scholten

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-383

Amount of Each Receipt this Period

45.00

**C.**

Full Name (Last, First, Middle Initial)

Gary Paul Scholten

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-384

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey D. Schreiber

Mailing Address 201 Jones Road  
Principal Financial Grp

City State Zip Code  
Waltham MA 02451-1605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP of Bus Development-Tpa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-477

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey D. Schreiber

Mailing Address 201 Jones Road  
Principal Financial Grp

City State Zip Code  
Waltham MA 02451-1605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP of Bus Development-Tpa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-478

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Edward M. Schuh

Mailing Address 2732 Daniel Avenue

City State Zip Code  
Dallas TX 75205-1512

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Investment Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-351

Amount of Each Receipt this Period

16.00

**SUBTOTAL** of Receipts This Page (optional) .....

46.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Edward M. Schuh

Mailing Address 2732 Daniel Avenue

City

Dallas

State

TX

Zip Code

75205-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Investment Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-352

Amount of Each Receipt this Period

16.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Elizabeth Shaff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2640.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-601

Amount of Each Receipt this Period

110.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Elizabeth Shaff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2640.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-602

Amount of Each Receipt this Period

110.00

**SUBTOTAL** of Receipts This Page (optional) .....

236.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Daniel J. Shanahan

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City State Zip Code  
Charlotte NC 28277-2467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Regional Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-221

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Daniel J. Shanahan

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City State Zip Code  
Charlotte NC 28277-2467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Regional Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Transaction ID: 200912015526-222

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Laurel J. Shultz

Mailing Address 111 West State Street

City State Zip Code  
Mason City IA 50401-3131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP- Emerging Mkt Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-675

Amount of Each Receipt this Period

33.00

**SUBTOTAL** of Receipts This Page (optional) .....

73.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Laurel J. Shultz

Mailing Address 111 West State Street

City

Mason City

State

IA

Zip Code

50401-3131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP- Emerging Mkt Segment

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

792.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-676

Amount of Each Receipt this Period

33.00

**B.**

Full Name (Last, First, Middle Initial)

Ellen Wilson Shumway

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Exec Director- Affiliate Op

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-363

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

Ellen Wilson Shumway

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Exec Director- Affiliate Op

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-364

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

97.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Tom Smith

Mailing Address 2000 Riveredge Parkway Northwest,

City

Atlanta

State

GA

Zip Code

30328-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 9

Transaction ID: 200912015526-1256

Amount of Each Receipt this Period

28.85

**B.**

Full Name (Last, First, Middle Initial)

Tom Smith

Mailing Address 2000 Riveredge Parkway Northwest,

City

Atlanta

State

GA

Zip Code

30328-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 9

Transaction ID: 200912015526-1257

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

Dwight N. Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Financial Officer- Ris

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.90

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 9

Transaction ID: 200912015526-345

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

67.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Dwight N. Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chief Financial Officer- Ris

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.90

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-346

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Norman R. Sorensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal International,  
Inc.

Occupation

Exec VP Int'l Asset Accum

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-927

Amount of Each Receipt this Period

76.92

**C.**

Full Name (Last, First, Middle Initial)

Norman R. Sorensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal International,  
Inc.

Occupation

Exec VP Int'l Asset Accum

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-928

Amount of Each Receipt this Period

76.92

**SUBTOTAL** of Receipts This Page (optional) .....

163.84

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Kathleen M. Souhrada

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Recruiting & Diversity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-613

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Kathleen M. Souhrada

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Recruiting & Diversity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-614

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Deanna Dawnette Strable-Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.04

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-259

Amount of Each Receipt this Period

63.46

**SUBTOTAL** of Receipts This Page (optional) .....

94.22

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Deanna Dawnette Strable-Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

SVP Ind Life &amp; Spec Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: 200912015526-260

Amount of Each Receipt this Period

63.46

**B.**

Full Name (Last, First, Middle Initial)

Michael Jerome Streck

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP &amp; Corporate Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: 200912015526-871

Amount of Each Receipt this Period

15.40

**C.**

Full Name (Last, First, Middle Initial)

Michael Jerome Streck

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP &amp; Corporate Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: 200912015526-872

Amount of Each Receipt this Period

15.40

SUBTOTAL of Receipts This Page (optional) .....

94.26

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Maurice Randall Strickland

Mailing Address 888 7th Ave; 25th Floor

City

New York

State

NY

Zip Code

10106-2599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-Consultant Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-827

Amount of Each Receipt this Period

19.25

**B.**

Full Name (Last, First, Middle Initial)

Maurice Randall Strickland

Mailing Address 888 7th Ave; 25th Floor

City

New York

State

NY

Zip Code

10106-2599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Mng Dir-Consultant Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-828

Amount of Each Receipt this Period

19.25

**C.**

Full Name (Last, First, Middle Initial)

Kirk L. Tebo

Mailing Address 14755 N Outer 40, Suite 108  
Principal Financial Group

City

Chesterfield

State

MO

Zip Code

63017-2027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP of Sales - Retirement Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-645

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

48.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Kirk L. Tebo

Mailing Address 14755 N Outer 40, Suite 108  
Principal Financial Group

City State Zip Code  
Chesterfield MO 63017-2027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-646

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Karen S. Thomann

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP & CIO-Retire Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-605

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

Karen S. Thomann

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP & CIO-Retire Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-606

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

73.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Daniel J. Thomas

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Asst Dir - IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-223

Amount of Each Receipt this Period

15.38

**B.**

Full Name (Last, First, Middle Initial)

Daniel J. Thomas

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Asst Dir - IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-224

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

James Martin Thomas

Mailing Address 7979 E Tufts Avenue Parkway; Suite  
Principal Financial Group

City

Denver

State

CO

Zip Code

80237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-429

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

40.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

James Martin Thomas

Mailing Address 7979 E Tufts Avenue Parkway; Suite  
Principal Financial Group

City State Zip Code  
Denver CO 80237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-430

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Joni Lynn Tibbetts

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP- Sales Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.75

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-551

Amount of Each Receipt this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)

Joni Lynn Tibbetts

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP- Sales Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.75

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-552

Amount of Each Receipt this Period

5.00

**SUBTOTAL** of Receipts This Page (optional) .....

20.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Terrence Michael Tobin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Prin Enterprise Cap

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1210

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Terrence Michael Tobin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Prin Enterprise Cap

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1211

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Allen Trom

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Asst Dir-Operation Excellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-771

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

40.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Mark Allen Trom

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Asst Dir-Operation Excellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-772

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Leanne M. Valentine

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-685

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

Leanne M. Valentine

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-686

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

73.48

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Patricia Rae Van Thomme

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Sourcing/Supplier Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-939

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Patricia Rae Van Thomme

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Sourcing/Supplier Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-940

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Luke Joseph Vandermillen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP RIS Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-733

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Luke Joseph Vandermillen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP RIS Marketing

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-734

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Audrey M. Vaughn

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Medical Management

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-51

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Audrey M. Vaughn

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Medical Management

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-52

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Joseph B. Wallace

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Capital Markets

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-563

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph B. Wallace

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Director-Capital Markets

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-564

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Liliana G. Waters

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CFO-Life & Health Distribution

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-691

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

40.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Liliana G. Waters

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

CFO-Life & Health Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-692

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Donald Eugene Weitzel

Mailing Address 2000 Riveredge Parkway Northwest,

City

Atlanta

State

GA

Zip Code

30328-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Business Operations & Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-317

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Donald Eugene Weitzel

Mailing Address 2000 Riveredge Parkway Northwest,

City

Atlanta

State

GA

Zip Code

30328-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP-Business Operations & Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-318

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Hugh B. White

Mailing Address 485 Metro Place South, Suite 206  
Principal Financial Group

City State Zip Code  
Dublin OH 43017-5332

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Vice President-Grp Non Med

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-413

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Hugh B. White

Mailing Address 485 Metro Place South, Suite 206  
Principal Financial Group

City State Zip Code  
Dublin OH 43017-5332

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Vice President-Grp Non Med

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-414

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Steven Whitty

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
VP Corporate Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1180

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

72.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Steven Whitty

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

VP Corporate Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1181

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Harrison Wireman, II

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Tax Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-1038

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Harrison Wireman, II

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

AVP-Tax Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-1039

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

72.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jayne M. Woods

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Financial Analyst IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-453

Amount of Each Receipt this Period

8.90

**B.**

Full Name (Last, First, Middle Initial)

Jayne M. Woods

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Financial Analyst IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 9

Transaction ID: 200912015526-454

Amount of Each Receipt this Period

8.90

**C.**

Full Name (Last, First, Middle Initial)

Larry Donald Zimpleman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4061.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 200912015526-671

Amount of Each Receipt this Period

169.23

**SUBTOTAL** of Receipts This Page (optional) .....

187.03

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Larry Donald Zimpleman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Life Ins Co.

Occupation

Chairman, President &amp; CEO

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4061.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: 200912015526-672

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional) .....

169.23

TOTAL This Period (last page this line number only) .....

8713.46



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 105 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee	<b>Transaction ID:</b> 58C1A726CC0BD82F60D <b>Date of Disbursement</b>																				
Mailing Address 120 Maryland Avenue NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	3		2	0	0	9												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2009 Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Democratic Senatorial Campaign Committee	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution																					
<b>B.</b> Full Name (Last, First, Middle Initial) Ed Royce for Congress	<b>Transaction ID:</b> B570610C04DE6C0D31B <b>Date of Disbursement</b>																				
Mailing Address PO Box 2525	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	9												
City Orange State CA Zip Code 92859	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Edward R. Royce	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 40																					
<b>C.</b> Full Name (Last, First, Middle Initial) Larson for Congress	<b>Transaction ID:</b> AD3A594A19B48CCE032 <b>Date of Disbursement</b>																				
Mailing Address 29 Ruff Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	9												
City Glastonbury State CT Zip Code 06033	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name John B. Larson	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 01																					

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 106 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Lee Terry for Congress

Mailing Address PO Box 540098

City  
OmahaState  
NEZip Code  
68154Purpose of Disbursement  
2010 PrimaryCandidate Name  
Lee Terry011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE District: 02

Transaction ID: 369E6D51C272E6343E7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Republican Party of Iowa

Mailing Address 621 E. Ninth Street

City  
Des MoinesState  
IAZip Code  
50309Purpose of Disbursement  
2009 ContributionCandidate Name  
Republican Party of Iowa011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: 3BCAB17DDB27D9099AE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

5000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Hagenow for Iowa House

Mailing Address 1915 69th Street

City  
Windsor Heights

State  
IA

Zip Code  
50322

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 7B84B83A052B51EC7AD

Date of Disbursement

11 / 04 / 2009

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Johnson for Senate District No. 3

Mailing Address P.O. Box 279

City  
Ocheyedan

State  
IA

Zip Code  
51354-0279

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 84EAC049C9F2AAB3FE7

Date of Disbursement

11 / 10 / 2009

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Kettering Campaign

Mailing Address 272 Crescent Park Drive

City  
Lake View

State  
IA

Zip Code  
51450

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 4A683B83A3754FBCAB4

Date of Disbursement

11 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) McKinley for Iowa</p> <p>Mailing Address 21884 483rd Lane</p> <p>City Chariton State IA Zip Code 50049</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4A105220B588F508F20</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>750.00</td> </tr> </table> <p>011 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	0	9	750.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	0	/	2	0	0	9													
750.00																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Noble for Senate</p> <p>Mailing Address 8915 NW Polk City Drive</p> <p>City Ankeny State IA Zip Code 50023</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3AA51D760E290DD9CB</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>250.00</td> </tr> </table> <p>011 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	9	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	9													
250.00																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Oldson for State Representative</p> <p>Mailing Address 418 38th Place</p> <p>City Des Moines State IA Zip Code 50312</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E8F76C68778D580B94B</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>750.00</td> </tr> </table> <p>011 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	5	/	2	0	0	9	750.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	5	/	2	0	0	9													
750.00																						
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p> <p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<table border="1"> <tr> <td>1750.00</td> </tr> <tr> <td></td> </tr> </table>	1750.00																				
1750.00																						

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) People for Roger Thomas	<b>Transaction ID:</b> D1419EB74B80DA4BF28 <b>Date of Disbursement</b>																				
Mailing Address 17658 Domino Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	8		2	0	0	9												
City Elkader State IA Zip Code 52043	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table>	750.00																			
750.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Petersen for State Representative	<b>Transaction ID:</b> EB9C1E8AF891559D8E3 <b>Date of Disbursement</b>																				
Mailing Address 1346 47th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	0		2	0	0	9												
City Des Moines State IA Zip Code 50311	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Rielly for Senate	<b>Transaction ID:</b> 53ABDCCACF7C0C03A0E <b>Date of Disbursement</b>																				
Mailing Address 113 North Market Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	9												
City Oskaloosa State IA Zip Code 52577	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 110 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Sands for State House

Mailing Address 134 Orchard Lane

City State Zip Code  
Columbus Junction IA 52738Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 941A08FBF86E49FDCED

Date of Disbursement

M M / D D / Y Y Y Y  
1 1 / 1 8 / 2 0 0 9

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Warnstadt for Senate Committee

Mailing Address 3301 Chambers Street

City State Zip Code  
Sioux City IA 51104Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 533665B1DABF9D7DB7D

Date of Disbursement

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

1250.00

TOTAL This Period (last page this line number only) ►

6750.00